

PART B—ISSUE FEE TRANSMITTAL

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

1401-1400-30.00
501-30.00

1. CORRESPONDENCE ADDRESS		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
R/C		INVENTOR'S NAME	
		Street Address	
		City, State and ZIP Code	
		CO-INVENTOR'S NAME	
		Street Address	
		City, State and ZIP Code	
<input type="checkbox"/> Check if additional changes are on reverse side			

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
First Named Applicant 08/510,377	08/02/95	003	EDUN, M	2516 07/23/96

TITLE OF INVENTION OGUSU, MIKIO

MUSICAL INFORMATION RECORDING AND REPRODUCING TECHNIQUE FOR USE WITH A RECORDING MEDIUM HAVING A UTOC AREA

	ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
2	164/PD-4489	369-047.000	C33	UTILITY	NO	\$1250.00	10/23/96

3. Correspondence address change (Complete only if there is a change)	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.
	1 LOEB & LOEB LLP
	2 _____
	810 BL 11/05/96 08580377
	1 142 1,290.00 CK
	810 BL 11/05/96 08510377
	1 561 30.00 CK

DO NOT USE THIS SPACE

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)	6a. The following fees are enclosed:
(1) NAME OF ASSIGNEE: YAMAHA CORPORATION	<input checked="" type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies 10
(2) ADDRESS: (CITY & STATE OR COUNTRY) Hamamatsu, Japan	6b. The following fees should be charged to:
	DEPOSIT ACCOUNT NUMBER 12-1820 (ENCLOSE PART C)
	<input type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies _____
	<input checked="" type="checkbox"/> Any Deficiencies in Enclosed Fees

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature) *Roger R. Wise* (Date) *10/17/96*
Roger R. Wise, Reg. No. 31,204
NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

1. TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE

Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Box ISSUE FEE
Commissioner of Patents and Trademarks
Washington, D.C. 20231

on October 17, 1996
(Date)

Roger R. Wise, Reg. No. 31,204
(Name of person making deposit signing)

Roger R. Wise
(Signature)

October 17, 1996
(Date)

Note: If this certificate of mailing is used, it can only be used to transmit the Issue Fee. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Burden Hour Statement: This form is estimated to take .2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Office of Information Systems, Patent and Trademark Office, Washington, D.C. 20231, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, (Project 0651-0033), Washington, D.C. 20503. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner of Patents and Trademarks, Box Issue Fee, Washington, DC 20231.

PART C - CHARGE TO DEPOSIT ACCOUNT

1. CORRESPONDENCE ADDRESS

23M1/6723
FEDERAL TRADE COMMISSION
55 LEXINGTON AVENUE
NEW YORK
NEW YORK 10005

10/17/96

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
First Named Applicant				

TITLE OF
INVENTION

	ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE

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2a. The following fees are enclosed:
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2. TRANSMIT THIS FORM WITH PART B WHEN AUTHORIZING USE OF A DEPOSIT ACCOUNT